

# **EXHIBIT 7**

Form 1.06/1

**FLORIDA TRANSFORMER, INC.****INDUCTION PROCEDURE  
NEW ASSOCIATE**Name Neal Thompson Date \_\_\_\_\_Dept. Transportation Date Employed 08/30/2004**SUPERVISOR CHECK LIST:****II. First Day**

- ☐ Introduce yourself – Give your name, position and get his/her name (actual) and name he/she wishes to be called by:

NEAL THOMPSON  
Name

- ☒ Extend a cordial welcome to Company & Department
- ☒ Show where to hang extra clothing – discuss clothes to wear for safety and comfort.
- ☒ Show location of vending machines. Explain news center / bulletin board usage.
- ☒ Show restrooms – (Use properly, keep clean, no smoking or eating).
- ☒ Explain smoking restrictions.
- ☒ Explain hours and days of work – Stress importance of working regularly.
- ☐ Review how to report necessary and unexpected absences.

Phone (352) 681-3945 - Mr./Mrs. Corette Thompson

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